## Application Data Sheet

#### Application Information

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: EXERCISE REPETITIOUS MOTION

COUNTER

Attorney Docket Number:: 5502-1001

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED STATES OF AMERICA

Status:: Full Capacity

Given Name:: MARTHA

Middle Name:: Z.

Family Name:: MARTINEZ

City of Residence:: WEST JEFFERSON

State or Province of Residence:: OHIO

Country of Residence: UNITED STATES OF AMERICA

Street of Mailing 710 TAYLOR BLAIR ROAD

Address::

City of Mailing Address:: WEST JEFFERSON

State or Province of Mailing Address:: OHIO

Country of Mailing Address:: UNITED STATES OF AMERICA

Postal or Zip Code of Mailing Address:: 43162

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED STATES OF AMERICA

Status:: Full Capacity

Given Name:: KATHRYN
Middle Name:: SUSAN
Family Name:: EATON

City of Residence:: WEST JEFFERSON

State or Province of Residence:: OHIO

Country of Residence: UNITED STATES OF AMERICA

Street of Mailing 710 TAYLOR BLAIR ROAD

Address::

City of Mailing Address:: WEST JEFFERSON

State or Province of Mailing Address:: OHIO

Country of Mailing Address:: UNITED STATES OF AMERICA

Postal or Zip Code of Mailing Address:: 43162

Correspondence	Information
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Correspondence Customer Number:: 000466

# Representative Information

Representative	Customer	Number::	000466	

#### Domestic Priority Information

Application::	Continuity Type::	Parent	Parent
		Application::	Filing
			Date::
This application	Non-Provisional of	60/276,039	3/16/01

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

## Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::